

BUDGET SUMMARY - DSS FUNDS

SUB-GRANT PERIOD: FROM ____/____/____ TO ____/____/____ SUB-GRANTEE NAME: _____

BUDGET CATEGORY	JUSTIFICATION (How costs were determined)	TOTAL DSS REQUEST
SALARIES		
EMP. BENEFITS		
POSTAGE		
RENT & UTILITIES		
EQUIPMENT		
PRINTING		
CONSUMABLE SUPPLIES		
TRAVEL		
OTHER (Specify)		
OTHER (Specify)		
OTHER (Specify)		
OTHER (Specify)		
TOTAL REQUESTED FROM DSS		

* Awarded funds cannot be used to supplant existing funds.